

Exhibit 1

Schools and Libraries Universal Service
Receipt of Service Confirmation FormTo be completed by the Billed Entity
Please read instructions before completing.(You can also file online at www.usac.org/sl.)Applicant's Form Identifier **UNITE WAN**
(Create your own code to identify THIS Form 486)Form 486 Application#: _____
(To be assigned by administrator)**Block 1: Billed Entity Information****1. Name of Billed Entity****Pueblo City School District 60****2. Billed Entity Number****3. Funding Year July 1, 2009 through June 30, 2010****4. Complete Mailing Address of Billed Entity**
Street Address, P.O. Box, or Route Number**315 W 11th Street**

City

Pueblo

State

CO

Zip Code

81003

Telephone Number

Extension

719-549-7292

Fax Number

719-549-7281**5. Contact Person Information**

Contact Person Name

Cassie Walgren

Street Address, P.O. Box or Route Number

315 W. 11th Street

City

Pueblo

State

CO

Zip Code

81003

Check the box next to the preferred mode of contact. (At least one box MUST be checked.)

☐ Telephone Number

Extension

☐ Fax Number**719-549-7121****719-549-7195**☒ Email Address**cassandra.walgren@pueblocityschools.us**

0486010103

Entity Number	<u>142321</u>	Applicant's Form Identifier	<u>UNITE WAN</u>
Contact Person	<u>Cassie Walgren</u>	Phone Number	<u>719-549-7121</u>

Block 2: Early Filing Information and CIPA Waiver Requests**6a. Early Filing**

CHECK THE BOX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES STARTING **ON OR BEFORE** JULY 31 OF THE FUNDING YEAR.

- ☐ The Funding Requests listed in Block 3 have been approved by USAC as shown in my Funding Commitment Decision Letter (FCDL). I have confirmed with the service provider(s) featured in those Funding Requests that these services will start on or before July 31 of the Funding Year.

Remember: Early filing using Item 6a is an option if and ONLY if services will start within the month of July of the relevant Funding Year, all relevant certifications in Block 4 can be accurately made, and the Form 486 is postmarked on or before July 31 of the Funding Year.

6b. CIPA Waiver

CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR THE SECOND FUNDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPLIED FOR DISCOUNTS IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY.

- ☐ I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.

6c. CIPA Waiver for Libraries for Funding Year 2004

CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR FUNDING YEAR 2004 IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY FOR THE LIBRARY(IES) REPRESENTED ON THIS FORM 486.

- ☐ I am providing notification that, as of the date of the start of discounted services in Funding Year 2004, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Funding Year 2005.



Entity Number 142321 Applicant's Form Identifier UNITE WAN
 Contact Person Cassie Walgren Phone Number 719-549-7121

Block 3: Service Information

7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named service provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.
 Remember: The FRNs listed below must be from the same Funding Year as is listed in Block 1, Item 3.
 If you need additional pages, please label them 4A, 4B, 4C, etc. and indicate the number in the space provided here: Page 3

	(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL	(D) Service Provider Name From FCDL	(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)
1	650387	1848573	143029868	Unite Private Networks, LLC	07/01/2009
2					
3					
4					
5					
6					
7					
8					
10					
11					
12					



Entity Number 142321 Applicant's Form Identifier UNITE WAN
Contact Person Cassie Walgren Phone Number 719-549-7121

Block 4: Certifications and Signature

8. ☒ I certify that the entity(ies) receiving discounted services as indicated on this Form 486 are covered by technology plan(s) that have been approved by a state or other authorized body – a USAC-certified technology plan approver – prior to the commencement of service and that cover all 12 months of the funding year. If applicable, provide the name(s) of the organization(s) that approved a technology plan for any eligible entity that is receiving services covered under this Form 486. If EVERY FRN listed in the Form 486 is for basic telephone service only, enter "NONE" here.

Colorado Department of Education

9. ☒ I certify that the services listed on this Form 486 have been, are planned to be, or are being provided to all or some of the eligible entities identified in the Form 471 application(s) cited above. I certify that there are signed contracts covering all of the services listed on this Form 486 except for those services provided on a tariff or month-to-month basis. I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity; that I have examined this request; and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

10. ☒ I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits from those services. I recognize that I may be audited pursuant to this application and will retain for five years any and all records, including Forms 479 where required, that I rely upon to complete this form and, if audited, will make available to the Administrator such records.

NOTES FOR COMPLETING THE CERTIFICATIONS IN ITEM 11: A Billed Entity who is the Administrative Authority must check Item 11a or 11b or 11c. Check only ONE item. If the Billed Entity is not the Administrative Authority, skip to Item 11d. A Billed Entity who represents one or more Administrative Authorities must check Item 11d or 11e. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.") A Billed Entity who represents one or more Administrative Authorities in Funding Years after Funding Year 2001 and who checks Item 11d must check Item 11f or 11g. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")

IF THIS FORM PERTAINS TO A FUNDING YEAR PRIOR TO FUNDING YEAR 2001 (THE FUNDING YEAR BEGINNING JULY 1, 2001), SKIP TO ITEM 12.



0 4 8 6 0 1 0 4 0 3

Entity Number 142321 Applicant's Form Identifier UNITE WAN
Contact Person Cassie Walgren Phone Number 719-549-7121

11. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:

I certify that as of the date of the start of discounted services:

- a. ☒ the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 has (have) complied with the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l).
- b. ☐ pursuant to the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), the recipient(s) of service represented in the Funding Request Number(s) on this Form 486:

(FOR SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING YEAR FOR PURPOSES OF CIPA) is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.

(FOR FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SECOND OR THIRD FUNDING YEAR FOR PURPOSES OF CIPA) is (are) in compliance with the requirements of CIPA under 47 U.S.C. § 254(l) and undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA under 47 U.S.C. § 254(h) for the next funding year.

- c. ☐ the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), does not apply because the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) receiving discount services only for telecommunications services.

FOR A BILLED ENTITY WHO REPRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES ¹:

- d. ☐ I certify as the Billed Entity for the consortium that I have collected duly completed and signed Forms 479 from all eligible members of the consortium.
- e. ☐ I certify as the Billed Entity for the consortium that the only services that have been approved for discounts under the universal service support mechanism on behalf of eligible members of the consortium are telecommunications services, and therefore the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), do not apply.

For Funding Years after Funding Year 2001: If you checked Item 11d above, check ONE of the boxes below:

- f. ☐ I certify that some or all of the eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver, and upon request from the Administrator I can provide this information; OR
- g. ☐ I certify that no eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver.

The certification language above is not intended to fully set forth or explain all the requirements of the statute.

¹ See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities."

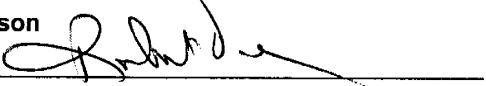
The certification language above is not intended to fully set forth or explain all the requirements of the statute.



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Do Not Write In This Area

Entity Number	<u>142321</u>	Applicant's Form Identifier	<u>UNITE WAN</u>
Contact Person	<u>Cassie Walgren</u>	Phone Number	<u>719-549-7121</u>

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

12. Signature of authorized person		13. Date	<u>10.20.09</u>
14. Printed name of authorized person <u>Dr. Robert Vise</u>			
15. Title or position of authorized person <u>Executive Director of Assessment and Technology</u>			
16a. Street Address, P.O. Box, or Route Number <u>315 W. 11th Street</u>			
City <u>Pueblo</u>			
State <u>CO</u>		Zip Code <u>81003</u>	
16b. Telephone number of authorized person		Extension	16c. Fax number of authorized person
<u>719-549-7292</u>			<u>719-549-7281</u>
16d. Email address of authorized person <u>robert.vise@pueblacityschools.us</u>			



Entity Number 142321 Applicant's Form Identifier UNITE WAN
Contact Person Cassie Walgren Phone Number 719-549-7121

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERF, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

Please submit this form to:

SLD Form 486
P. O. Box 7026
Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms
ATTN: SLD Form 486
3833 Greenway Drive
Lawrence, Kansas 66046
888-203-8100



Schools and Libraries Universal Service
Receipt of Service Confirmation Form

To be completed by the Billed Entity

Please read instructions before completing.

(You can also file online at www.usac.org/sl.)Applicant's Form Identifier **MICRO TECH**
(Create your own code to identify THIS Form 486)Form 486 Application# _____
(To be assigned by administrator)**Block 1: Billed Entity Information****1. Name of Billed Entity****Pueblo City School District 60****2. Billed Entity Number****3. Funding Year July 1, 2009 through June 30, 2010****4. Complete Mailing Address of Billed Entity**

Street Address, P.O. Box, or Route Number

315 W 11th Street

City

Pueblo

State

CO

Zip Code

81003

Telephone Number

Extension

719-549-7292

Fax Number

719-549-7281**5. Contact Person Information**

Contact Person Name

Cassie Walgren

Street Address, P.O. Box or Route Number

315 W. 11th Street

City

Pueblo

State

CO

Zip Code

81003

Check the box next to the preferred mode of contact. (At least one box MUST be checked.)



Telephone Number

Extension

719-549-7121

Fax Number

719-549-7195

Email Address

cassandra.walgren@pueblocityschools.us

0 4 8 6 0 1 0 1 0 3

Entity Number 142321 Applicant's Form Identifier MICRO TECH
Contact Person Cassie Walgren Phone Number 719-549-7121

Block 2: Early Filing Information and CIPA Waiver Requests

6a. Early Filing

CHECK THE BOX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES STARTING **ON OR BEFORE** JULY 31 OF THE FUNDING YEAR.

- ☐ The Funding Requests listed in Block 3 have been approved by USAC as shown in my Funding Commitment Decision Letter (FCDL). I have confirmed with the service provider(s) featured in those Funding Requests that these services will start on or before July 31 of the Funding Year.

Remember: Early filing using Item 6a is an option if and ONLY if services will start within the month of July of the relevant Funding Year, all relevant certifications in Block 4 can be accurately made, and the Form 486 is postmarked on or before July 31 of the Funding Year.

6b. CIPA Waiver

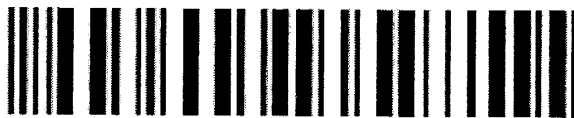
CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR THE SECOND FUNDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPLIED FOR DISCOUNTS IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY.

- ☐ I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.

6c. CIPA Waiver for Libraries for Funding Year 2004

CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR FUNDING YEAR 2004 IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY FOR THE LIBRARY(IES) REPRESENTED ON THIS FORM 486.

- ☐ I am providing notification that, as of the date of the start of discounted services in Funding Year 2004, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Funding Year 2005.



0 4 8 6 0 1 0 2 0 3

Entity Number 142321 Applicant's Form Identifier _____
Contact Person Cassie Walgren Phone Number 719-549-7121

Block 3: Service Information

7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named service provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.
Remember: The FRNs listed below must be from the same Funding Year as is listed in Block 1, Item 3.
If you need additional pages, please label them 4A, 4B, 4C, etc. and indicate the number in the space provided here: Page 3 _____

	(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL	(D) Service Provider Name From FCDL	(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)
1	696098	1912965	143010971	Microtech-Tel	07/01/2009
2					
3					
4					
5					
6					
7					
8					
10					
11					
12					



Entity Number 142321 Applicant's Form Identifier MICRO TECH
Contact Person Cassie Walgren Phone Number 719-549-7121

Block 4: Certifications and Signature

8. ☒ I certify that the entity(ies) receiving discounted services as indicated on this Form 486 are covered by technology plan(s) that have been approved by a state or other authorized body – a USAC-certified technology plan approver – prior to the commencement of service and that cover all 12 months of the funding year. If applicable, provide the name(s) of the organization(s) that approved a technology plan for any eligible entity that is receiving services covered under this Form 486. If EVERY FRN listed in the Form 486 is for basic telephone service only, enter "NONE" here.

Colorado Department of Education

9. ☒ I certify that the services listed on this Form 486 have been, are planned to be, or are being provided to all or some of the eligible entities identified in the Form 471 application(s) cited above. I certify that there are signed contracts covering all of the services listed on this Form 486 except for those services provided on a tariff or month-to-month basis. I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity; that I have examined this request; and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

10. ☒ I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits from those services. I recognize that I may be audited pursuant to this application and will retain for five years any and all records, including Forms 479 where required, that I rely upon to complete this form and, if audited, will make available to the Administrator such records.

NOTES FOR COMPLETING THE CERTIFICATIONS IN ITEM 11: A Billed Entity who is the Administrative Authority must check Item 11a or 11b or 11c. Check only ONE item. If the Billed Entity is not the Administrative Authority, skip to Item 11d. A Billed Entity who represents one or more Administrative Authorities must check Item 11d or 11e. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.") A Billed Entity who represents one or more Administrative Authorities in Funding Years after Funding Year 2001 and who checks Item 11d must check Item 11f or 11g. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")

IF THIS FORM PERTAINS TO A FUNDING YEAR PRIOR TO FUNDING YEAR 2001 (THE FUNDING YEAR BEGINNING JULY 1, 2001), SKIP TO ITEM 12.



0 4 8 6 0 1 0 4 0 3

Entity Number 142321 Applicant's Form Identifier MICRO TECH
Contact Person Cassie Walgren Phone Number 719-549-7121

11. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:

I certify that as of the date of the start of discounted services:

- a. ☒ the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 has (have) complied with the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l).
- b. ☐ pursuant to the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), the recipient(s) of service represented in the Funding Request Number(s) on this Form 486:
- (FOR SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING YEAR FOR PURPOSES OF CIPA) is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.
- (FOR FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SECOND OR THIRD FUNDING YEAR FOR PURPOSES OF CIPA) is (are) in compliance with the requirements of CIPA under 47 U.S.C. § 254(l) and undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA under 47 U.S.C. § 254(h) for the next funding year.
- c. ☐ the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), does not apply because the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) receiving discount services only for telecommunications services.

FOR A BILLED ENTITY WHO REPRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES ¹:

- d. ☐ I certify as the Billed Entity for the consortium that I have collected duly completed and signed Forms 479 from all eligible members of the consortium.
- e. ☐ I certify as the Billed Entity for the consortium that the only services that have been approved for discounts under the universal service support mechanism on behalf of eligible members of the consortium are telecommunications services, and therefore the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), do not apply.

For Funding Years after Funding Year 2001: If you checked Item 11d above, check ONE of the boxes below:

- f. ☐ I certify that some or all of the eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver, and upon request from the Administrator I can provide this information; OR
- g. ☐ I certify that no eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver.

The certification language above is not intended to fully set forth or explain all the requirements of the statute.

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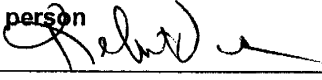
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Do Not Write In This Area

Entity Number	<u>142321</u>	Applicant's Form Identifier	<u>MICRO TECH</u>
Contact Person	<u>Cassie Walgren</u>	Phone Number	<u>719-549-7121</u>

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

12. Signature of authorized person 	13. Date <u>10.20.09</u>
14. Printed name of authorized person <u>Dr. Robert Vise</u>	
15. Title or position of authorized person <u>Executive Director of Assessment and Technology</u>	
16a. Street Address, P.O. Box, or Route Number <u>315 W. 11th Street</u>	
City <u>Pueblo</u>	
State <u>CO</u>	Zip Code <u>81003</u>
16b. Telephone number of authorized person <u>719-549-7292</u>	16c. Fax number of authorized person <u>719-549-7281</u>
16d. Email address of authorized person <u>robert.vise@pueblacityschools.us</u>	



Entity Number 142321 Applicant's Form Identifier MICRO TECH
Contact Person Cassie Walgren Phone Number 719-549-7121

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERF, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

Please submit this form to:

SLD Form 486
P. O. Box 7026
Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms
ATTN: SLD Form 486
3833 Greenway Drive
Lawrence, Kansas 66046
888-203-8100



0 4 8 6 0 1 0 7 0 3

Schools and Libraries Universal Service
Receipt of Service Confirmation FormTo be completed by the Billed Entity
Please read instructions before completing.(You can also file online at www.usac.org/sl.)Applicant's Form Identifier **UNITE LAN**
(Create your own code to identify THIS Form 486)Form 486 Application#: _____
(To be assigned by administrator)**Block 1: Billed Entity Information****1. Name of Billed Entity****Pueblo City School District 60****2. Billed Entity Number****3. Funding Year July 1, 2009 through June 30, 2010****4. Complete Mailing Address of Billed Entity**

Street Address, P.O. Box, or Route Number

315 W 11th Street

City

Pueblo

State

CO

Zip Code

81003

Telephone Number

Extension

719-549-7292

Fax Number

719-549-7281**5. Contact Person Information**

Contact Person Name

Cassie Walgren

Street Address, P.O. Box or Route Number

315 W. 11th Street

City

Pueblo

State

CO

Zip Code

81003

Check the box next to the preferred mode of contact. (At least one box MUST be checked.)

☐ Telephone Number

Extension

719-549-7121☐ Fax Number**719-549-7195**☒ Email Address**cassandra.walgren@pueblocityschools.us**

0 4 8 6 0 1 0 1 0 3

Entity Number 142321 Applicant's Form Identifier UNITE LAN
Contact Person Cassie Walgren Phone Number 719-549-7121

Block 2: Early Filing Information and CIPA Waiver Requests

6a. Early Filing

CHECK THE BOX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES STARTING **ON OR BEFORE** JULY 31 OF THE FUNDING YEAR.

- ☐ The Funding Requests listed in Block 3 have been approved by USAC as shown in my Funding Commitment Decision Letter (FCDL). I have confirmed with the service provider(s) featured in those Funding Requests that these services will start on or before July 31 of the Funding Year.

Remember: Early filing using Item 6a is an option if and ONLY if services will start within the month of July of the relevant Funding Year, all relevant certifications in Block 4 can be accurately made, and the Form 486 is postmarked on or before July 31 of the Funding Year.

6b. CIPA Waiver

CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR THE SECOND FUNDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPLIED FOR DISCOUNTS IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY.

- ☐ I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.

6c. CIPA Waiver for Libraries for Funding Year 2004

CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR FUNDING YEAR 2004 IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY FOR THE LIBRARY(IES) REPRESENTED ON THIS FORM 486.

- ☐ I am providing notification that, as of the date of the start of discounted services in Funding Year 2004, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Funding Year 2005.



0 4 8 6 0 1 0 2 0 3

Entity Number 142321 Applicant's Form Identifier UNITE LAN
 Contact Person Cassie Walgren Phone Number 719-549-7121

Block 3: Service Information

7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named service provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.
 Remember: The FRNs listed below must be from the same Funding Year as is listed in Block 1, Item 3.
 If you need additional pages, please label them 4A, 4B, 4C, etc. and indicate the number in the space provided here: Page 3

	(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL	(D) Service Provider Name From FCDL	(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)
1	696098	1913013	143029868	Unite Private Networks, LLC	07/01/2009
2					
3					
4					
5					
6					
7					
8					
10					
11					
12					



0 4 8 6 0 1 0 3 0 3

Entity Number 142321 Applicant's Form Identifier UNITE LAN
Contact Person Cassie Walgren Phone Number 719-549-7121

Block 4: Certifications and Signature

8. ☒ I certify that the entity(ies) receiving discounted services as indicated on this Form 486 are covered by technology plan(s) that have been approved by a state or other authorized body – a USAC-certified technology plan approver – prior to the commencement of service and that cover all 12 months of the funding year. If applicable, provide the name(s) of the organization(s) that approved a technology plan for any eligible entity that is receiving services covered under this Form 486. If EVERY FRN listed in the Form 486 is for basic telephone service only, enter "NONE" here.

Colorado Department of Education

9. ☒ I certify that the services listed on this Form 486 have been, are planned to be, or are being provided to all or some of the eligible entities identified in the Form 471 application(s) cited above. I certify that there are signed contracts covering all of the services listed on this Form 486 except for those services provided on a tariff or month-to-month basis. I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity; that I have examined this request; and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

10. ☒ I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits from those services. I recognize that I may be audited pursuant to this application and will retain for five years any and all records, including Forms 479 where required, that I rely upon to complete this form and, if audited, will make available to the Administrator such records.

NOTES FOR COMPLETING THE CERTIFICATIONS IN ITEM 11: A Billed Entity who is the Administrative Authority must check Item 11a or 11b or 11c. Check only ONE item. If the Billed Entity is not the Administrative Authority, skip to Item 11d. A Billed Entity who represents one or more Administrative Authorities must check Item 11d or 11e. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.") A Billed Entity who represents one or more Administrative Authorities in Funding Years after Funding Year 2001 and who checks Item 11d must check Item 11f or 11g. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")

IF THIS FORM PERTAINS TO A FUNDING YEAR PRIOR TO FUNDING YEAR 2001 (THE FUNDING YEAR BEGINNING JULY 1, 2001), SKIP TO ITEM 12.



0 4 8 6 0 1 0 4 0 3

Entity Number 142321 Applicant's Form Identifier UNITE LAN
Contact Person Cassie Walgren Phone Number 719-549-7121

11. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:

I certify that as of the date of the start of discounted services:

- a. ☒ the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 has (have) complied with the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l).
- b. ☐ pursuant to the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), the recipient(s) of service represented in the Funding Request Number(s) on this Form 486:

(FOR SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING YEAR FOR PURPOSES OF CIPA) is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.

(FOR FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SECOND OR THIRD FUNDING YEAR FOR PURPOSES OF CIPA) is (are) in compliance with the requirements of CIPA under 47 U.S.C. § 254(l) and undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA under 47 U.S.C. § 254(h) for the next funding year.

- c. ☐ the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), does not apply because the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) receiving discount services only for telecommunications services.

FOR A BILLED ENTITY WHO REPRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES ¹:

- d. ☐ I certify as the Billed Entity for the consortium that I have collected duly completed and signed Forms 479 from all eligible members of the consortium.
- e. ☐ I certify as the Billed Entity for the consortium that the only services that have been approved for discounts under the universal service support mechanism on behalf of eligible members of the consortium are telecommunications services, and therefore the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (l), do not apply.

For Funding Years after Funding Year 2001: If you checked Item 11d above, check ONE of the boxes below:

- f. ☐ I certify that some or all of the eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver, and upon request from the Administrator I can provide this information; OR
- g. ☐ I certify that no eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver.

The certification language above is not intended to fully set forth or explain all the requirements of the statute.

¹ See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities."

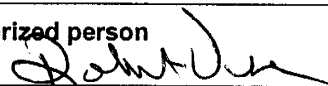
The certification language above is not intended to fully set forth or explain all the requirements of the statute.



0 4 8 6 0 1 0 6 0 3
Do Not Write In This Area

Entity Number	<u>142321</u>	Applicant's Form Identifier	<u>UNITE LAN</u>
Contact Person	<u>Cassie Walgren</u>	Phone Number	<u>719-549-7121</u>

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

12. Signature of authorized person 	13. Date <u>10.20.09</u>
14. Printed name of authorized person <u>Dr. Robert Vise</u>	
15. Title or position of authorized person <u>Executive Director of Assessment and Technology</u>	
16a. Street Address, P.O. Box, or Route Number <u>315 W. 11th Street</u>	
City <u>Pueblo</u>	
State <u>CO</u>	Zip Code <u>81003</u>
16b. Telephone number of authorized person <u>719-549-7292</u>	16c. Fax number of authorized person <u>719-549-7281</u>
16d. Email address of authorized person <u>robert.vise@pueblacityschools.us</u>	



Entity Number 142321 Applicant's Form Identifier UNITE LAN
Contact Person Cassie Walgren Phone Number 719-549-7121

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

Please submit this form to:

SLD Form 486
P. O. Box 7026
Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms
ATTN: SLD Form 486
3833 Greenway Drive
Lawrence, Kansas 66046
888-203-8100



Exhibit 2

----- Forwarded message -----

From: **SLD Problem Resolution** <SLD-Problem-Resolution@prod.vangent.com>

Date: Wed, Nov 11, 2009 at 7:35 AM

Subject: E-Rate Problem Resolution; Form 486; Case # 21-962720, 21-962717, 21-962715

To: "cassandra.walgren@pueblcityschools.us" <'cassandra.walgren@pueblcityschools.us'>

Date: 11/11/2009

Contact Name: Cassie Walgren

Applicant Name: Pueblo City School District 60

Contact Phone Number: 719-549-7121

Form Type: 486

Application Number(s): 630602

630622

630659

Applicant Form Identifier: 21-962720 UNITE LAN

21-962717 UNITE WAN

21-962715 MICRO TECH

Response Due Date: 11/18/2009

We recently sent a written request for additional information needed to successfully data enter your form. This is a reminder that the response due date is approaching. To date none of the requested information has been received. We need the following information from you so that we may complete data entry:

On these forms you listed the FRNs 1913013, 1848573, and 1912965 which are not funded. I will need for you to send me a request to cancel these forms.

Please make these corrections to your form and fax to my attention at 888-276-8736 or email the corrections to my attention at sld-problem-resolution@prod.vangent.com. Please reference the application number or form identifier and include your full name and title in all correspondences. If you have any questions, please call me at 888-203-8100 and reference **Case Number 21-962720, 21-962717, and 21-962715**.

We need to receive this information from you by **11/18/2009**. Failure to do so may result in rejection of your form or removal of an incomplete line. If you need additional time to prepare your response, please let me know as soon as possible.

If you need to cancel your form or any individual lines, please clearly indicate in your response that it is your intention to cancel the form or line. Include in any cancellation request the form number and/or Form Identifier, the Funding Request Number(s), and the complete name, title and signature of the authorized individual.

NOTE: A copy of this correspondence is being forwarded to your State E-Rate Coordinator for informational purposes only. The State E-Rate Coordinator is under no obligation to get the information nor are they required to respond within the 15 days.

Thank you for your cooperation and continued support of the Universal Service Program.

Megan Allred

Client Service Bureau / Problem Resolution

Schools and Libraries Division

Help Line: 888-203-8100

Fax: 888-276-8736

E-Mail: sld-problem-resolution@prod.vangent.com

--

Cassie Walgren
Budget Supervisor
Pueblo City Schools
(719) 549-7121

Exhibit 3



Technology Department
315 W. 11th Street, Pueblo, CO 81003
(719) 549-7292

November 17, 2009

Schools and Libraries Division
FAX: 888-276-8736

Submitted by: Cassie Walgren
Applicant: Pueblo City School District 60
Billed Entity #: 142321
Contact Name: Cassie Walgren
Contact Phone: (719) 549-7121
Contact E-mail: cassandra.walgren@pueblocitieschools.us
Case Numbers: 21-962720, 21-962717, 21-962715

Dear Megan:

Please cancel the 486's submitted for FRN's **1913013, 1848573 and 1912965**. The forms were inadvertently submitted before funding was approved.

Sincerely,

Cassie Walgren
Accounting Supervisor

Exhibit 4

Page 12



Schools and Libraries Division

FUNDING COMMITMENT DECISION LETTER
(Funding Year 2009: 07/01/2009 - 06/30/2010)

December 8, 2009

Daniel Combs
PUEBLO CITY SCHOOL DISTRICT 60
1920 Montezuma Road
PUEBLO, CO 81003-2804

Re: Form 471 Application Number: 650387
Billed Entity Number (BEN): 142321
Billed Entity FCC RN: 0004235644
Applicant's Form Identifier: YR12WAN

Thank you for your Funding Year 2009 application for Universal Service Support and for any assistance you provided throughout our review. The current status of the funding request(s) in the Form 471 application cited above and featured in the Funding Commitment Report(s) (Report) at the end of this letter is as follows.

- The amount, \$170,505.06 is "Approved."

Please refer to the Report following this letter for specific funding request decisions and explanations. The Universal Service Administrative Company (USAC) is also sending this information to your service provider(s) so preparations can begin for implementing your approved discount(s) after you file FCC Form 486, Receipt of Service Confirmation Form. A guide that provides a definition for each line of the Report is available in the Reference Area of our website.

NEXT STEPS

- Work with your service provider to determine if you will receive discounted bills or if you will request reimbursement from USAC after paying your bills in full
- Review technology planning approval requirements
- Review CIPA requirements
- File Form 486
- Invoice USAC using the Form 474 (service provider) or Form 472 (Billed Entity applicant) - as products and services are being delivered and billed

TO APPEAL THIS DECISION:

You have the option of filing an appeal with the SLD or directly with the Federal Communications Commission (FCC).

If you wish to appeal a decision in this letter to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

1. Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.
2. State outright that your letter is an appeal. Include the following to identify the letter and the decision you are appealing:
 - Appellant name,
 - Applicant name and service provider name, if different from appellant,
 - Applicant BEN and Service Provider Identification Number (SPIN),
 - Form 471 Application Number 650387 as assigned by USAC,
 - "Funding Commitment Decision Letter for Funding Year 2009," AND
 - The exact text or the decision that you are appealing.

3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
4. If you are the applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are the service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
5. Provide an authorized signature on your letter of appeal.

To submit your appeal to USAC by email, email your appeal to appeals@sl.universalservice.org. USAC will automatically reply to incoming emails to confirm receipt.

To submit your appeal to USAC by fax, fax your appeal to (973) 599-6542.

To submit your appeal to USAC on paper, send your appeal to:

Letter of Appeal
Schools and Libraries Division - Correspondence Unit
100 S. Jefferson Road
P.O. Box 902
Whippany, NJ 07981

If you wish to appeal a decision in this letter to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal to the FCC. Your appeal must be received by the FCC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in the "Appeals Procedure" posted in the Reference Area of our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

OBLIGATION TO PAY NON-DISCOUNT PORTION

Applicants are required to pay the non-discount portion of the cost of the products and/or services to their service provider(s). Service providers are required to bill applicants for the non-discount portion. The FCC stated that requiring applicants to pay their share ensures efficiency and accountability in the program. If USAC is being billed via the FCC Form 474, the service provider must bill the applicant at the same time it bills USAC. If USAC is being billed via the FCC Form 472, the applicant pays the service provider in full (the non-discount plus discount portion) and then seeks reimbursement from USAC. If you are using a trade-in as part of your non-discount portion, please refer to our website for more information.

NOTICE ON RULES AND FUNDS AVAILABILITY

Applicants' receipt of funding commitments is contingent on their compliance with all statutory, regulatory, and procedural requirements of the Schools and Libraries Program. Applicants who have received funding commitments continue to be subject to audits and other reviews that USAC and/or the FCC may undertake periodically to assure that funds that have been committed are being used in accordance with all such requirements. USAC may be required to reduce or cancel funding commitments that were not issued in accordance with such requirements, whether due to action or inaction, including but not limited to that by USAC, the applicant, or the service provider. USAC, and other appropriate authorities (including but not limited to the FCC), may pursue enforcement actions and other means of recourse to collect improperly disbursed funds. The timing of payment of invoices may also be affected by the availability of funds based on the amount of funds collected from contributing telecommunications companies.

Schools and Libraries Division
Universal Service Administrative Company

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FUNDING COMMITMENT REPORT
Billed Entity Name: PUEBLO CITY SCHOOL DISTRICT 60
BEN: 142321
Funding Year: 2009

Comment on RAL corrections: The applicant did not submit any RAL corrections.

Form 471 Application Number: 650387
Funding Request Number: 1848573
Funding Status: Funded
Category of Service: Telecommunications Service
Form 470 Application Number: 197380000475497
SPIN: 143029868
Service Provider Name: Unite Private Networks, LLC
Contract Number: N/A
Billing Account Number: N/A
Multiple Billing Account Numbers: N
Service Start Date: 07/01/2009
Service End Date: N/A
Contract Award Date: 01/27/2004
Contract Expiration Date: 06/30/2019
Shared Worksheet Number: 1054256
Number of Months Recurring Service Provided in Funding Year: 12
Annual Pre-discount Amount for Eligible Recurring Charges: \$207,933.00
Annual Pre-discount Amount for Eligible Non-recurring Charges: \$.00
Pre-discount Amount: \$207,933.00
Discount Percentage Approved by the USAC: 82%
Funding Commitment Decision: \$170,505.06 - FRN approved as submitted

FCDL Date: 12/08/2009

Wave Number: 031

Last Allowable Date for Delivery and Installation for Non-Recurring Services: 09/30/2010



FUNDING COMMITMENT DECISION LETTER
(Funding Year 2009: 07/01/2009 - 06/30/2010)

December 8, 2009

Daniel Combs
PUEBLO CITY SCHOOL DISTRICT 60
1920 Montezuma Road
Pueblo, CO 81003

Re: Form 471 Application Number: 696098
Billed Entity Number (BEN): 142321
Billed Entity FCC RN: 0004235644
Applicant's Form Identifier: 09-14internalmain

Thank you for your Funding Year 2009 application for Universal Service Support and for any assistance you provided throughout our review. The current status of the funding request(s) in the Form 471 application cited above and featured in the Funding Commitment Report(s) (Report) at the end of this letter is as follows.

- The amount, \$232,935.05 is "Approved."

Please refer to the Report following this letter for specific funding request decisions and explanations. The Universal Service Administrative Company (USAC) is also sending this information to your service provider(s) so preparations can begin for implementing your approved discount(s) after you file FCC Form 486, Receipt of Service Confirmation Form. A guide that provides a definition for each line of the Report is available in the Reference Area of our website.

NEXT STEPS

- Work with your service provider to determine if you will receive discounted bills or if you will request reimbursement from USAC after paying your bills in full
- Review technology planning approval requirements
- Review CIPA requirements
- File Form 486
- Invoice USAC using the Form 474 (service provider) or Form 472 (Billed Entity applicant) - as products and services are being delivered and billed

TO APPEAL THIS DECISION:

You have the option of filing an appeal with the SLD or directly with the Federal Communications Commission (FCC).

If you wish to appeal a decision in this letter to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

1. Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.
2. State outright that your letter is an appeal. Include the following to identify the letter and the decision you are appealing:
 - Appellant name,
 - Applicant name and service provider name, if different from appellant,
 - Applicant BEN and Service Provider Identification Number (SPIN),
 - Form 471 Application Number 696098 as assigned by USAC,
 - "Funding Commitment Decision Letter for Funding Year 2009," AND
 - The exact text or the decision that you are appealing.

3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
4. If you are the applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are the service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
5. Provide an authorized signature on your letter of appeal.

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Letter of Appeal
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100 S. Jefferson Road
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Whippany, NJ 07981

If you wish to appeal a decision in this letter to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal to the FCC. Your appeal must be received by the FCC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in the "Appeals Procedure" posted in the Reference Area of our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

OBLIGATION TO PAY NON-DISCOUNT PORTION

Applicants are required to pay the non-discount portion of the cost of the products and/or services to their service provider(s). Service providers are required to bill applicants for the non-discount portion. The FCC stated that requiring applicants to pay their share ensures efficiency and accountability in the program. If USAC is being billed via the FCC Form 474, the service provider must bill the applicant at the same time it bills USAC. If USAC is being billed via the FCC Form 472, the applicant pays the service provider in full (the non-discount plus discount portion) and then seeks reimbursement from USAC. If you are using a trade-in as part of your non-discount portion, please refer to our website for more information.

NOTICE ON RULES AND FUNDS AVAILABILITY

Applicants' receipt of funding commitments is contingent on their compliance with all statutory, regulatory, and procedural requirements of the Schools and Libraries Program. Applicants who have received funding commitments continue to be subject to audits and other reviews that USAC and/or the FCC may undertake periodically to assure that funds that have been committed are being used in accordance with all such requirements. USAC may be required to reduce or cancel funding commitments that were not issued in accordance with such requirements, whether due to action or inaction, including but not limited to that by USAC, the applicant, or the service provider. USAC, and other appropriate authorities (including but not limited to the FCC), may pursue enforcement actions and other means of recourse to collect improperly disbursed funds. The timing of payment of invoices may also be affected by the availability of funds based on the amount of funds collected from contributing telecommunications companies.

Schools and Libraries Division
Universal Service Administrative Company

=====

FUNDING COMMITMENT REPORT
Billed Entity Name: PUEBLO CITY SCHOOL DISTRICT 60
BEN: 142321
Funding Year: 2009

Comment on RAL corrections: The applicant did not submit any RAL corrections.

Form 471 Application Number: 696098
Funding Request Number: 1912965
Funding Status: Funded
Category of Service: Basic Maintenance of Internal Connection
Form 470 Application Number: 952710000653309
SPIN: 143010971
Service Provider Name: Microtech-Tel
Contract Number: N/A
Billing Account Number: N/A
Multiple Billing Account Numbers: N
Service Start Date: 07/01/2009
Service End Date: N/A
Contract Award Date: 01/18/2008
Contract Expiration Date: 06/30/2013
Shared Worksheet Number: 1137501
Number of Months Recurring Service Provided in Funding Year: 12
Annual Pre-discount Amount for Eligible Recurring Charges: \$30,110.88
Annual Pre-discount Amount for Eligible Non-recurring Charges: \$.00
Pre-discount Amount: \$30,110.88
Discount Percentage Approved by the USAC: 90%
Funding Commitment Decision: \$27,099.79 - FRN approved as submitted

FCDL Date: 12/08/2009

Wave Number: 031

Last Allowable Date for Delivery and Installation for Non-Recurring Services: 09/30/2010

FUNDING COMMITMENT REPORT
Billed Entity Name: PUEBLO CITY SCHOOL DISTRICT 60
BEN: 142321
Funding Year: 2009

Comment on RAL corrections: The applicant did not submit any RAL corrections.

Form 471 Application Number: 696098
Funding Request Number: 1913013
Funding Status: Funded
Category of Service: Basic Maintenance of Internal Connection
Form 470 Application Number: 952710000653309
SPIN: 143029868
Service Provider Name: Unite Private Networks, LLC
Contract Number: N/A
Billing Account Number: N/A
Multiple Billing Account Numbers: N
Service Start Date: 07/01/2009
Service End Date: N/A
Contract Award Date: 01/18/2008
Contract Expiration Date: 06/30/2013
Shared Worksheet Number: 1137501
Number of Months Recurring Service Provided in Funding Year: 12
Annual Pre-discount Amount for Eligible Recurring Charges: \$228,705.84
Annual Pre-discount Amount for Eligible Non-recurring Charges: \$.00
Pre-discount Amount: \$228,705.84
Discount Percentage Approved by the USAC: 90%
Funding Commitment Decision: \$205,835.26 - FRN approved as submitted

FCDL Date: 12/08/2009
Wave Number: 031
Last Allowable Date for Delivery and Installation for Non-Recurring Services: 09/30/2010

USAC

Schools and Libraries Division
Correspondence Unit
100 South Jefferson Road
P.O. Box 902
Whippany, NJ 07981

TIME SENSITIVE MATERIAL

00259
Daniel Combs
PUEBLO CITY SCHOOL DISTRICT 60
1920 Montezuma Road
Pueblo, CO 81003

Exhibit 5



Unite WAN
FRN# 1848573

Schools and Libraries Division

URGENT REMINDER: YOUR FORM 486 MAY BE LATE
(Funding Year 2009: 07/01/2009 - 06/30/2010)

Date: April 13, 2010

Daniel Combs
PUEBLO CITY SCHOOL DISTRICT 60
1920 Montezuma Road
PUEBLO, CO 81003-2804

RE: Billed Entity Number: 142321
Form 471 Application Number: 650387

This letter is a reminder that you may have missed the deadline for submitting and certifying your FCC Form 486, Receipt of Service Confirmation Form, based on your FCDL Date and the Service Start Date indicated on your FCC Form 471, Block 5 Discount Funding Request(s).

You have 20 days from the date of this letter to submit and certify your Form(s) 486 with no penalty, if your services did start at least 120 days before the above date.

If you fail to submit and certify your Form 486 by 05/03/2010 your Service Start Date may be adjusted once you submit and certify your Form 486. USAC may reduce your commitment for recurring services if your Service Start Date is adjusted.

THIS IS YOUR ONLY REMINDER. If your services have not yet started or have started within the last 120 days, **YOUR FORM 486 MUST BE POSTMARKED OR SUBMITTED ONLINE WITHIN 120 DAYS OF YOUR SERVICE START DATE.**

Following this letter is a Form 486 Reminder Report (Report) that lists the Funding Request Number(s) for which either a Form 486 has not been submitted or a Form 486 has been submitted online, but not certified.

Form 486 is available in the Apply Online area of our website at www.usac.org/sl. We recommend that you use the Deadline Tool on our website to check the Form 486 deadlines for specific FRNs and other Program deadlines.

Complete Program information is available on our website. You may also contact our Client Service Bureau via email using the "Submit a Question" feature on our website, toll-free via fax at 1-888-276-8736 or toll-free via phone at 1-888-203-8100.

Schools and Libraries Division
Universal Service Administrative Company

Form 486 Reminder Report
Form 471 650387

We have not received your completed Form 486 and certifications - either online or on paper.

Funding Request Numbers(s)

1848573

00003



Schools and Libraries Division

URGENT REMINDER: YOUR FORM 486 MAY BE LATE
(Funding Year 2009: 07/01/2009 - 06/30/2010)

Date: April 13, 2010

Daniel Combs
PUEBLO CITY SCHOOL DISTRICT 60
1920 Montezuma Road
Pueblo, CO 81003

RE: Billed Entity Number: 142321
Form 471 Application Number: 696098

This letter is a reminder that you may have missed the deadline for submitting and certifying your FCC Form 486, Receipt of Service Confirmation Form, based on your FCDL Date and the Service Start Date indicated on your FCC Form 471, Block 5 Discount Funding Request(s).

You have 20 days from the date of this letter to submit and certify your Form(s) 486 with no penalty, if your services did start at least 120 days before the above date.

If you fail to submit and certify your Form 486 by 05/03/2010 your Service Start Date may be adjusted once you submit and certify your Form 486. USAC may reduce your commitment for recurring services if your Service Start Date is adjusted.

THIS IS YOUR ONLY REMINDER. If your services have not yet started or have started within the last 120 days, **YOUR FORM 486 MUST BE POSTMARKED OR SUBMITTED ONLINE WITHIN 120 DAYS OF YOUR SERVICE START DATE.**

Following this letter is a Form 486 Reminder Report (Report) that lists the Funding Request Number(s) for which either a Form 486 has not been submitted or a Form 486 has been submitted online, but not certified.

Form 486 is available in the Apply Online area of our website at www.usac.org/sl. We recommend that you use the Deadline Tool on our website to check the Form 486 deadlines for specific FRNs and other Program deadlines.

Complete Program information is available on our website. You may also contact our Client Service Bureau via email using the "Submit a Question" feature on our website, toll-free via fax at 1-888-276-8736 or toll-free via phone at 1-888-203-8100.

Schools and Libraries Division
Universal Service Administrative Company

Form 486 Reminder Report
Form 471 696098

We have not received your completed Form 486 and certifications - either online or on paper.

Funding Request Numbers(s)

1912965
1913013

00076

Exhibit 6

FCC Form
486

Do Not Write In This Area

FRN 1912965

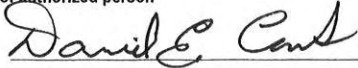
Approval by OMB
3060-0853

Application ID : 813396

Entity Number	142321	Applicant's Form Identifier	Micro-2010
Contact Person	Cassie Walgren	Phone Number	719-549-7121

I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity, that I have examined this request, and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

12. Signature of authorized person



13. Date

10/9/2010 1:49:13 PM

14. Printed name of authorized person

Daniel E. Combs

15. Title or position of authorized person

Director of Technology

16a. Street Address, P.O. Box, or Route Number

1920 Montezuma Road

City

Pueblo

State CO

Zip Code

81003 -

16b. Telephone number of authorized person

719-549-7292

Extension

16c. Fax number of authorized person

719-253-6080

16d. Email address of authorized person

daniel.combs@pueblocitieschools.us

Please submit this form to:

SLD Form 486
P. O. Box 7026
Lawrence, Kansas 66044-7026

471#
696098

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms
ATTN: SLD Form 486
3833 Greenway Drive
Lawrence, Kansas 66046
888-203-8100



0486010603

FCC Form 486	Do Not Write in this Area		Approval by OMB 3060-0853 Estimated time per response: 1.5 hours
Schools and Libraries Universal Service Receipt of Service Confirmation Form			
To be completed by the Billed Entity Please read instructions before completing.			
(You can also file online at www.usac.org/sl .)			
Applicant's Form Identifier Micro-2010 (Create your own code to identify THIS Form 486)		Form 486 Application# 813396 (To be assigned by administrator)	
Block 1: Billed Entity Information			
1. Name of Billed Entity PUEBLO CITY SCHOOL DISTRICT 60			
2. Billed Entity Number 142321		3. Funding Year July 1, 2009 through June 30, 2010	
4. Complete Mailing Address of Billed Entity Street Address, P.O. Box, or Route Number 315 W 11TH ST			
City PUEBLO			
State CO		Zip Code 81003 - 2804	
Telephone Number 719-549-7100		Extension Fax Number 719-549-7281	
5. Contact Person Information Contact Person Name Cassie Walgren			
Street Address, P.O. Box or Route Number 315 W. 11th Street			
City Pueblo			
State CO		Zip Code 81003 -	
Check the box next to the preferred mode of contact. (At least one box MUST be checked.)			
<input type="checkbox"/> Telephone Number 719-549-7121		<input type="checkbox"/> Fax Number 719-549-7114	
<input checked="" type="checkbox"/> Email Address cassandra.walgren@pueblocitieschools.us			



0486010103

Entity Number	142321	Applicant's Form Identifier	Micro-2010
Contact Person	Cassie Walgron	Phone Number	719-549-7121
Block 2: Early Filing Information and CIPA Waiver Requests			
6a. Early Filing			
CHECK THE BOX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES STARTING ON OR BEFORE JULY 31 OF THE FUNDING YEAR.			
<input type="checkbox"/> The Funding Requests listed in Block 3 have been approved by USAC as shown in my Funding Commitment Decision Letter (FCDL). I have confirmed with the service provider(s) featured in those Funding Requests that these services will start on or before July 31 of the Funding Year.			
Remember: Early filing using Item 6a is an option if and ONLY if services will start within the month of July of the relevant Funding Year, all relevant certifications in Block 4 can be accurately made, and the Form 486 is postmarked on or before July 31 of the Funding Year.			
6b. CIPA Waiver			
CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR THE SECOND FUNDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPLIED FOR DISCOUNTS IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY.			
<input type="checkbox"/> I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.			
6c. CIPA Waiver for Libraries for Funding Year 2004			
CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR FUNDING YEAR 2004 IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY FOR THE LIBRARY(IES) REPRESENTED ON THIS FORM 486.			
<input type="checkbox"/> I am providing notification that, as of the date of the start of discounted services in Funding Year 2004, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Funding Year 2005.			



0486010203

Entity Number	142321	Applicant's Form Identifier	Micro-2010
Contact Person	Cassie Walgren	Phone Number	719-549-7121

Block 3: Service Information

7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named service provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.

Remember: The FRNs listed below must be from the same Funding Year as is listed in Block 1, Item 3. If you need additional pages, please label them 4A, 4B, 4C, etc. and indicate the number in the space provided here:

Page 3 _____

(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL	(D) Service Provider Name From FCDL	(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)
696098	1912965	143010971	Microtech-Tel	7/1/2009



0486010303

Entity Number	142321	Applicant's Form Identifier	Micro-2010
Contact Person	Cassie Weigren	Phone Number	719-549-7121

Block 4: Certifications and Signature

8. ☒ I certify that the entity(ies) receiving discounted services as indicated on this Form 486 are covered by technology plan(s) that have been approved by a state or other authorized body ? a USAC-certified technology plan approver ? prior to the commencement of service and that cover all 12 months of the funding year. If applicable, provide the name(s) of the organization(s) that approved a technology plan for any eligible entity that is receiving services covered under this Form 486. If EVERY FRN listed in the Form 486 is for basic telephone service only, enter "NONE" here.

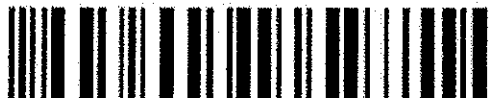
Colorado Department of Education - CDE

9. ☒ I certify that the services listed on this Form 486 have been, are planned to be, or are being provided to all or some of the eligible entities identified in the Form 471 application(s) cited above. I certify that there are signed contracts covering all of the services listed on this Form 486 except for those services provided on a tariff or month-to-month basis. I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity, that I have examined this request; and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

10. ☒ I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits from those services. I recognize that I may be audited pursuant to this application and will retain for five years any and all records, including Forms 479 where required, that I rely upon to complete this form and, if audited, will make available to the Administrator such records.

NOTES FOR COMPLETING THE CERTIFICATIONS IN ITEM 11: A Billed Entity who is the Administrative Authority must check Item 11a or 11b or 11c. Check only ONE item. If the Billed Entity is not the Administrative Authority, skip to item 11d. A Billed Entity who represents one or more Administrative Authorities must check Item 11d or 11e. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.") A Billed Entity who represents one or more Administrative Authorities in Funding Years after Funding Year 2001 and who checks Item 11d must check Item 11f or 11g. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")

IF THIS FORM PERTAINS TO A FUNDING YEAR PRIOR TO FUNDING YEAR 2001 (THE FUNDING YEAR BEGINNING JULY 1, 2001), SKIP TO ITEM 12.



0486010403

Entity Number	142321	Applicant's Form Identifier	Micro-2010
Contact Person	Cassie Walgren	Phone Number	718-649-7121

11. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:

I certify that as of the date of the start of discounted services:

- a. ☒ the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 has (have) complied with the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i).
- b. ☐ pursuant to the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), the recipient(s) of service represented in the Funding Request Number(s) on this Form 486:

(FOR SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING YEAR FOR PURPOSES OF CIPA) is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.

(FOR FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SECOND OR THIRD FUNDING YEAR FOR PURPOSES OF CIPA) is (are) in compliance with the requirements of CIPA under 47 U.S.C. § 254(i) and undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA under 47 U.S.C. § 254(h) for the next funding year.

- c. ☐ the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), does not apply because the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) receiving discount services only for telecommunications services.

FOR A BILLED ENTITY WHO REPRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES

- d. ☐ I certify as the Billed Entity for the consortium that I have collected duly completed and signed Forms 479 from all eligible members of the consortium.
- e. ☐ I certify as the Billed Entity for the consortium that the only services that have been approved for discounts under the universal service support mechanism on behalf of eligible members of the consortium are telecommunications services, and therefore the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), do not apply.

For Funding Years after Funding Year 2001: If you checked Item 11d above, check ONE of the boxes below:

- f. ☐ I certify that some or all of the eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver, and upon request from the Administrator I can provide this information; OR
- g. ☐ I certify that no eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver.

The certification language above is not intended to fully set forth or explain all the requirements of the statute.

¹ See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities."

The certification language above is not intended to fully set forth or explain all the requirements of the statute.



0486010503

FCC Form
486

Do Not Write in This Area

Entity Number	142321	Applicant's Form Identifier	Micro-2010
Contact Person	Cassie Walgren	Phone Number	719-549-7121

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

12. Signature of authorized person	13. Date
14. Printed name of authorized person	
Daniel E. Combs	
15. Title or position of authorized person	
Director of Technology	
16a. Street Address, P.O. Box, or Route Number	
1920 Monlezuma Road	
City	
Pueblo	
State	CO
Zip Code	81003 -
16b. Telephone number of authorized person	Extension
719-549-7292	
16c. Fax number of authorized person	
719-253-6080	
16d. Email address of authorized person	
daniel.combs@pueblocitieschools.us	



0486010603

Entity Number	142321	Applicant's Form Identifier	Micro-2010
Contact Person	Cassio Walgren	Phone Number	719-549-7121

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1996, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

Please submit this form to:

SLD Form 486
P. O. Box 7026
Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms
ATTN: SLD Form 486
3833 Greenway Drive
Lawrence, Kansas 66046
888-203-8100



0486010703

FCC Form
486

Do Not Write In This Area

Approval by OMB
3060-0853

Application ID : 813397

Entity Number	142321	Applicant's Form Identifier	Unite2010
Contact Person	Cassie Walgren	Phone Number	719-549-7121

I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity, that I have examined this request, and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

12. Signature of authorized person



13. Date

10/9/2010 1:55:01 PM

14. Printed name of authorized person

Daniel E. Combs

15. Title or position of authorized person

Director of Technology

16a. Street Address, P.O. Box, or Route Number

1920 Montezuma Road

City

Pueblo

State CO

Zip Code

81003 -

16b. Telephone number of authorized person

719-549-7292

Extension

16c. Fax number of authorized person

719-253-6080

16d. Email address of authorized person

daniel.combs@pueblocitieschools.us

Please submit this form to:

SLD Form 486
P. O. Box 7026
Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms
ATTN: SLD Form 486
3833 Greenway Drive
Lawrence, Kansas 66046
888-203-8100

471 #

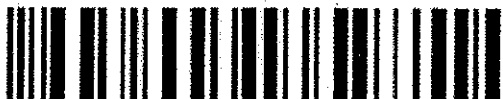
696098 - LAN
650387 - WAN

FRN #

1913013
1848573

0486010603

FCC Form 486	Do Not Write in this Area		Approval by OMB 3060-0853 Estimated time per response: 1.5 hours	
Schools and Libraries Universal Service Receipt of Service Confirmation Form				
To be completed by the Billed Entity Please read instructions before completing.				
(You can also file online at www.usac.org/sl .)				
Applicant's Form Identifier (Create your own code to identify THIS Form 486)		Form 486 Application# (To be assigned by administrator)		
Unite2010		813397		
Block 1: Billed Entity Information				
1. Name of Billed Entity				
PUEBLO CITY SCHOOL DISTRICT 60				
2. Billed Entity Number		3. Funding Year July 1, 2009 through June 30, 2010		
142321				
4. Complete Mailing Address of Billed Entity				
Street Address, P.O. Box, or Route Number				
315 W 11TH ST				
City		State		Zip Code
PUEBLO		CO		81003 - 2804
Telephone Number		Extension	Fax Number	
719-549-7100			719-549-7281	
5. Contact Person Information				
Contact Person Name				
Cassie Walgren				
Street Address, P.O. Box or Route Number				
315 W. 11th Street				
City				
Pueblo				
State		Zip Code		
CO		81003 -		
Check the box next to the preferred mode of contact. (At least one box MUST be checked.)				
<input type="checkbox"/> Telephone Number				
719-549-7121				
<input type="checkbox"/> Extension				
<input type="checkbox"/> Fax Number				
719-549-7114				
<input checked="" type="checkbox"/> Email Address				
cassandra.walgren@pueblocitieschools.us				



0486010103

Entity Number	142321	Applicant's Form Identifier	Unite2010
Contact Person	Caesie Walgren	Phone Number	719-549-7121

Block 2: Early Filing Information and CIPA Waiver Requests

6a. Early Filing

CHECK THE BOX BELOW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES STARTING ON OR BEFORE JULY 31 OF THE FUNDING YEAR.

☐ The Funding Requests listed in Block 3 have been approved by USAC as shown in my Funding Commitment Decision Letter (FCDL). I have confirmed with the service provider(s) featured in those Funding Requests that those services will start on or before July 31 of the Funding Year.

Remember: Early filing using Item 6a is an option if and ONLY if services will start within the month of July of the relevant Funding Year, all relevant certifications in Block 4 can be accurately made, and the Form 486 is postmarked on or before July 31 of the Funding Year.

6b. CIPA Waiver

CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR THE SECOND FUNDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU HAVE APPLIED FOR DISCOUNTS IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY.

☐ I am providing notification that, as of the date of the start of discounted services, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they apply for discounts.

6c. CIPA Waiver for Libraries for Funding Year 2004

CHECK THE BOX BELOW IF YOU ARE REQUESTING A WAIVER OF CIPA REQUIREMENTS FOR FUNDING YEAR 2004 IF YOU AS THE BILLED ENTITY ARE THE ADMINISTRATIVE AUTHORITY FOR THE LIBRARY(IES) REPRESENTED ON THIS FORM 486.

☐ I am providing notification that, as of the date of the start of discounted services in Funding Year 2004, I am unable to make the certifications required by the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Funding Year 2005.



0486010203

Entity Number	142321	Applicant's Form Identifier	Unite2010
Contact Person	Cassie Walgren	Phone Number	719-549-7121

Block 3: Service Information

7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named service provider may begin submitting Invoices to SLD. You will need your FCDL for some of the information required below.

Remember: The FRNs listed below must be from the same Funding Year as is listed in Block 1, Item 3.
If you need additional pages, please label them 4A, 4B, 4C, etc. and indicate the number in the space provided here:

Page 3 _____

(A) 471 Application Number From FCDL	(B) Funding Request Number (FRN) From FCDL	(C) Service Provider Identification Number (SPIN) From FCDL	(D) Service Provider Name From FCDL	(E) Funding Year Service Start Date (Earliest Date that Discounted Services Will Begin)
696098	1913013	143029868	Unite Private Networks, LLC	7/1/2009
650387	1848573	143029868	Unite Private Networks, LLC	7/1/2009



0486010303

Entity Number	142321	Applicant's Form Identifier	Unit2010
Contact Person	Cassie Walgren	Phone Number	719-549-7121

Block 4: Certifications and Signature

8. ☒ I certify that the entity(ies) receiving discounted services as indicated on this Form 486 are covered by technology plan(s) that have been approved by a state or other authorized body ? a USAC-certified technology plan approver ? prior to the commencement of service and that cover all 12 months of the funding year. If applicable, provide the name(s) of the organization(s) that approved a technology plan for any eligible entity that is receiving services covered under this Form 486. If EVERY FRN listed in the Form 486 is for basic telephone service only, enter "NONE" here.

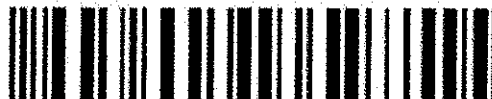
Colorado Department of Education - CDE

9. ☒ I certify that the services listed on this Form 486 have been, are planned to be, or are being provided to all or some of the eligible entities identified in the Form 471 application(s) cited above. I certify that there are signed contracts covering all of the services listed on this Form 486 except for those services provided on a tariff or month-to-month basis. I certify that I am authorized to submit this receipt of service confirmation on behalf of the above-named Billed Entity; that I have examined this request; and that, to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

10. ☒ I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as shering in the services receive an appropriate share of benefits from those services. I recognize that I may be audited pursuant to this application and will retain for five years any and all records, including Forms 479 where required, that I rely upon to complete this form and, if audited, will make available to the Administrator such records.

NOTES FOR COMPLETING THE CERTIFICATIONS IN ITEM 11: A Billed Entity who is the Administrative Authority must check Item 11a or 11b or 11c. Check only ONE item. If the Billed Entity is not the Administrative Authority, skip to Item 11d. A Billed Entity who represents one or more Administrative Authorities must check Item 11d or 11e. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.") A Billed Entity who represents one or more Administrative Authorities in Funding Years after Funding Year 2001 and who checks Item 11d must check Item 11f or 11g. (See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities.")

IF THIS FORM PERTAINS TO A FUNDING YEAR PRIOR TO FUNDING YEAR 2001 (THE FUNDING YEAR BEGINNING JULY 1, 2001), SKIP TO ITEM 12.



0486010403

Entity Number	142321	Applicant's Form Identifier	Unite2010
Contact Person	Cassie Walgren	Phone Number	718-649-7121

11. FOR A BILLED ENTITY WHO IS THE ADMINISTRATIVE AUTHORITY:

I certify that as of the date of the start of discounted services:

- a. ☒ the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 has (have) complied with the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i).
- b. ☐ pursuant to the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), the recipient(s) of service represented in the Funding Request Number(s) on this Form 486:

(FOR SCHOOLS and FOR LIBRARIES IN THE FIRST FUNDING YEAR FOR PURPOSES OF CIPA) is (are) undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA for the next funding year, but has (have) not completed all requirements of CIPA for this funding year.

(FOR FUNDING YEAR 2003 ONLY: FOR LIBRARIES IN THE SECOND OR THIRD FUNDING YEAR FOR PURPOSES OF CIPA) is (are) in compliance with the requirements of CIPA under 47 U.S.C. § 254(i) and undertaking such actions, including any necessary procurement procedures, to comply with the requirements of CIPA under 47 U.S.C. § 254(h) for the next funding year.

- c. ☐ the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), does not apply because the recipient(s) of service represented in the Funding Request Number(s) on this Form 486 is (are) receiving discount services only for telecommunications services.

FOR A BILLED ENTITY WHO REPRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES

- d. ☐ I certify as the Billed Entity for the consortium that I have collected duly completed and signed Forms 479 from all eligible members of the consortium.
- e. ☐ I certify as the Billed Entity for the consortium that the only services that have been approved for discounts under the universal service support mechanism on behalf of eligible members of the consortium are telecommunications services, and therefore the requirements of the Children's Internet Protection Act, as codified at 47 U.S.C. § 254(h) and (i), do not apply.

For Funding Years after Funding Year 2001: If you checked Item 11d above, check ONE of the boxes below:

- f. ☐ I certify that some or all of the eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver, and upon request from the Administrator I can provide this information; OR
- g. ☐ I certify that no eligible consortium members checked Form 479 Item 6d or Item 6e to seek a CIPA Waiver.

The certification language above is not intended to fully set forth or explain all the requirements of the statute.

¹ See the Form 486 Instructions for Item 11, "Special Notes for Billed Entities Who Represent One or More Administrative Authorities."

The certification language above is not intended to fully set forth or explain all the requirements of the statute.



0486010503

FCC Form
486

Do Not Write in This Area

Entity Number	142321	Applicant's Form Identifier	Unit62010
Contact Person	Cassie Waigren	Phone Number	719-549-7121

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

12. Signature of authorized person	13. Date
14. Printed name of authorized person	
Daniel E. Combs	
15. Title or position of authorized person	
Director of Technology	
16a. Street Address, P.O. Box, or Route Number	
1820 Montezuma Road	
City	
Pueblo	
State	CO
Zip Code	81003 -
16b. Telephone number of authorized person	Extension
719-549-7292	
16c. Fax number of authorized person	
719-253-6060	
16d. Email address of authorized person	
daniel.combs@pueblocitieschools.us	



0486010603

Entity Number	142321	Applicant's Form Identifier	Unite2010
Contact Person	Cassie Walgren	Phone Number	719-649-7121

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0853), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0853.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

Please submit this form to:

SLD Form 486
P. O. Box 7026
Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:

SLD Forms
ATTN: SLD Form 486
3833 Greenway Drive
Lawrence, Kansas 66046
888-203-8100



0486010703

Exhibit 7

USAC
Universal Service Administrative Company
Schools and Libraries Division
Correspondence Unit
30 Lanidex Plaza West
PO Box 685
Parsippany, NJ 07054-0685



TIME SENSITIVE MATERIAL

00031
Cassie Walgren
PUEBLO CITY SCHOOL DISTRICT 60
315 W. 11th Street
Pueblo, CO 81003



Schools and Libraries Division

FORM 486 NOTIFICATION LETTER
(Funding Year 2009: 07/01/2009 - 06/30/2010)

October 27, 2010

Cassie Walgren
PUEBLO CITY SCHOOL DISTRICT 60
315 W. 11th Street
Pueblo, CO 81003

Re: Form 486 Application Number: 813397
Applicant's Form 486 Identifier: Unite2010

This letter is to notify you that the Universal Service Administrative Company (USAC) has received and accepted an FCC Form 486, Receipt of Service Confirmation Form, from you. This notification is to confirm the information that you provided. This information is being shared with the service provider whose SPIN you identified on each Funding Request Number (FRN).

You may be receiving this letter to revise or correct a previous Form 486 Notification Letter. The information contained in this letter supersedes any previous notification you may have received, including, but not limited to, a previously adjusted Service Start Date or previously reduced funding commitment.

NEXT STEPS

Discuss with your service provider whether you would like discounts on your bills or to pay your bills in full and be reimbursed for discounts.

Invoice USAC before the invoice deadline using the applicant invoice (BEAR Form - FCC Form 472) for reimbursements after paying the bills in full or the service provider invoice (SPI Form - FCC Form 474) for discounts. Whichever method you choose, you must pay your non-discount portion, as stated in Program rules. Program rules also require that participants maintain all documentation for at least five years after delivery of discount service.

TO APPEAL THE SERVICE START DATE/FUNDING COMMITMENT CHANGE DECISION

If you wish to appeal the Service Start Date change(s) and/or funding commitment adjustment(s) indicated in this letter, your appeal must be received by USAC or postmarked within 60 days of the above date on this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

1. Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.

Schools and Libraries Division - Correspondence Unit
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685
Visit us online at: www.usac.org/sl

2. State outright that your letter is an appeal. Include the following to identify the letter and the decision you are appealing:
 - appellant name,
 - applicant or service provider name, if different than appellant,
 - applicant BEN and service provider SPIN,
 - Form 486 Number 813397 and ERN(s) as assigned by USAC,
 - "Form 486 Notification Letter for Funding Year 2009", AND
 - the exact text or the decision that you are appealing.
3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation
4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by the USAC's decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by the USAC's decision.
5. Provide an authorized signature on your letter of appeal.

To submit your appeal to USAC by email, email your appeal to appeals@sl.universalservice.org. USAC will automatically reply to incoming emails to confirm receipt.

To submit your appeal to us by fax, fax your appeal to (973) 599-6542.

To submit your appeal to us on paper, send your appeal to:

Letter of Appeal
Schools and Libraries Division - Correspondence Unit
100 South Jefferson Road
P.O. Box 902
Whippany, NJ 07981

You have the option of filing an appeal with USAC or directly with the Federal Communications Commission (FCC). You should refer to CC Docket No. 02-6 on the first page of your appeal to the FCC. Your appeal must be received by the FCC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in the "Appeals Procedure" posted on our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

A guide to the data reported in our letter reports is posted in the Reference Area of our website. Complete Program information, including invoice deadlines is also posted on our website. You may also contact our Client Service Bureau by email using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736, or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division
Universal Service Administrative Company

FORM 486 NOTIFICATION LETTER REPORT
(Funding Year 2009)

Funding Request Number: 1848573
Form 471 Application Number: 650387
Service Provider Name: Unite Private Networks, LLC
Service Provider Identification Number: 143029868
Billing Account Number: N/A
Service Start Date: 06/16/2010*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$14,208.75

Funding Request Number: 1913013
Form 471 Application Number: 696098
Service Provider Name: Unite Private Networks, LLC
Service Provider Identification Number: 143029868
Billing Account Number: N/A
Service Start Date: 06/16/2010*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$17,152.94


USAC
Universal Service Administrative Company
Schools and Libraries Division
Correspondence Unit
30 Lanidex Plaza West
PO Box 685
Parsippany, NJ 07054-0685



TIME SENSITIVE MATERIAL

00030
Cassie Walgren
PUEBLO CITY SCHOOL DISTRICT 60
315 W. 11th Street
Pueblo, CO 81003



Schools and Libraries Division



FORM 486 NOTIFICATION LETTER
(Funding Year 2009: 07/01/2009 - 06/30/2010)

October 27, 2010

Cassie Walgren
PUEBLO CITY SCHOOL DISTRICT 60
315 W. 11th Street
Pueblo, CO 81003

Re: Form 486 Application Number: 813396
Applicant's Form 486 Identifier: Micro-2010

This letter is to notify you that the Universal Service Administrative Company (USAC) has received and accepted an FCC Form 486, Receipt of Service Confirmation Form, from you. This notification is to confirm the information that you provided. This information is being shared with the service provider whose SPIN you identified on each Funding Request Number (FRN).

You may be receiving this letter to revise or correct a previous Form 486 Notification Letter. The information contained in this letter supersedes any previous notification you may have received, including, but not limited to, a previously adjusted Service Start Date or previously reduced funding commitment.

NEXT STEPS

Discuss with your service provider whether you would like discounts on your bills or to pay your bills in full and be reimbursed for discounts.

Invoice USAC before the invoice deadline using the applicant invoice (BEAR Form - FCC Form 472) for reimbursements after paying the bills in full or the service provider invoice (SPI Form - FCC Form 474) for discounts. Whichever method you choose, you must pay your non-discount portion, as stated in Program rules. Program rules also require that participants maintain all documentation for at least five years after delivery of discount service.

TO APPEAL THE SERVICE START DATE/FUNDING COMMITMENT CHANGE DECISION

If you wish to appeal the Service Start Date change(s) and/or funding commitment adjustment(s) indicated in this letter, your appeal must be received by USAC or postmarked within 60 days of the above date on this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

1. Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.

Schools and Libraries Division - Correspondence Unit
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685
Visit us online at: www.usac.org/sl

2. State outright that your letter is an appeal. Include the following to identify the letter and the decision you are appealing:
 - appellant name,
 - applicant or service provider name, if different than appellant,
 - applicant BEN and service provider SPIN,
 - Form 486 Number 813396 and ERN(s) as assigned by USAC,
 - "Form 486 Notification Letter for Funding Year 2009", AND
 - the exact text or the decision that you are appealing.
3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation
4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by the USAC's decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by the USAC's decision.
5. Provide an authorized signature on your letter of appeal.

To submit your appeal to USAC by email, email your appeal to appeals@sl.universalservice.org. USAC will automatically reply to incoming emails to confirm receipt.

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Letter of Appeal
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Whippany, NJ 07981

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Schools and Libraries Division
Universal Service Administrative Company

FORM 486 NOTIFICATION LETTER REPORT
(Funding Year 2009)

Funding Request Number: 1912965
Form 471 Application Number: 696098
Service Provider Name: Microtech-Tel
Service Provider Identification Number: 143010971
Billing Account Number: N/A
Service Start Date: 06/16/2010*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$2,258.31



Exhibit 8

Do not write in this space.

Approval by OMB

3060-0856

Estimated time per response: 1.5 hours

Please read instructions before completing.

Universal Service for Schools and Libraries

(To be completed by schools, libraries, or consortia.)

BILLED ENTITY APPLICANT REIMBURSEMENT FORM

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

Only one Service Provider Identification Number (SPIN) per form.

Must be completed and signed by the Billed Entity Applicant and signed by the relevant service provider.

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERF, Paperwork Reduction Act Project (3060-0856), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0856.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

BLOCK 1: HEADER INFORMATION


1. 471 Billed Entity Name	Pueblo City School District 60
2. 471 Billed Entity Number	142321
3. Service Provider Identification Number (SPIN)	143029868
4. Contact Name	Cassie Walgren
5. Contact Telephone Number	719-549-7121
6. Reimbursement Form Number	Unite-2
7. Reimbursement Date to USAC	11/3/10
8. Total Reimbursement Amount (total of Block 2, Item 15 - 14.2 digits maximum)	\$31,361.69


Billed Entity Applicant Reimbursement Form

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

471 Billed Entity Name Pueblo City School District 60471 Billed Entity Number 142321Contact Name Cassie WalgrenContact Telephone Number 719-549-7121Reimbursement Form Number Unite-2**BLOCK 2: LINE ITEM INFORMATION PER FUNDING REQUEST NUMBER**

	(9) FCC Form 471 Application Number (10 digits) (from Funding Commitment Decision Letter)	(10) Funding Request Number (FRN) (10 digits) (from Funding Commitment Decision Letter)	(11) Bill Frequency	(12) Customer Billed Date (mm/yyyy)	(13) Shipping Date to Customer or Last Day of Work Performed (mm/dd/yyyy)	(14) Total (Undiscounted) Amount for Service (14.2 digits max.)	(15) Discount Amount Billed to USAC (14.2 digits max.)
			DO NOT WRITE IN THIS COLUMN.	For each FRN, complete either Column (12) or Column (13), but not both Columns		14.2 digits allows for dollars and cents	
1	650387	1848573		07/01/2009		207,933	14,208.75
2	696098	1913013		07/01/2009		230,436	17,152.94
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
TOTAL REIMBURSEMENT AMOUNT TO BE ENTERED INTO ITEM (8)						31,361.69	

BILLED ENTITY APPLICANT Reimbursement Form	
471 Billed Entity Name <u>Pueblo City School District 60</u>	
471 Billed Entity Number <u>142321</u>	
Contact Name <u>Cassie Walgren</u>	
Reimbursement Form Number <u>Unite-2</u>	
Block 3: Billed Entity Certification	
I certify that I am authorized to submit this Billed Entity Applicant Reimbursement Form on behalf of the eligible schools, libraries, or consortia of those entities represented on this Form, and certify to the best of my knowledge, information and belief, as follows:	
A. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form represent charges for eligible services delivered to and used by eligible schools, libraries, or consortia of those entities for educational purposes, on or after the service start date reported on the associated Form 486.	
B. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form were already billed by the service provider and paid by the Billed Entity Applicant on behalf of eligible schools, libraries, and consortia of those entities.	
C. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form are for eligible services approved by the fund administrator pursuant to a Form 471 Funding Commitment Decision Letter.	
D. I recognize that I may be audited pursuant to this application and will retain for five years any and all records that I rely upon to fill in this form.	
16. Signature of authorized person 	17. Date <u>8 Nov 2010</u>
18. Printed name of authorized person Daniel E. Combs	
19. Title or position of authorized person Director of Technology	
20. Telephone number of authorized person 7195497292	
21. Address of authorized person 1920 Montezuma Road Pueblo, CO 81003	

BILLED ENTITY APPLICANT Reimbursement Form	
471 Billed Entity Name <u>Pueblo City School District 60</u>	
471 Billed Entity Number <u>142321</u>	
Contact Name <u>Cassie Walgren</u>	
Reimbursement Form Number <u>Unite-2</u>	
Block 4: Service Provider Acknowledgment	
I certify that I am authorized to submit this Service Provider Acknowledgment for this Billed Entity Applicant Reimbursement Form, and acknowledge to the best of my knowledge, information and belief, as follows:	
A. The service provider must remit the discount amount authorized by the fund administrator to the Billed Entity Applicant who prepared and submitted this Billed Entity Applicant Reimbursement Form as soon as possible after the fund administrator's notification to the service provider of the amount of the approved discounts on this Billed Entity Applicant Reimbursement Form, but in no event later than 20 business days after receipt of the reimbursement payment from the fund administrator, subject to the restriction set forth in B. below.	
B. The service provider must remit payment of the approved discount amount to the Billed Entity Applicant prior to tendering or making use of the payment issued by the Universal Service Administrative Company to the service provider of the approved discounts for the Billed Entity Applicant Reimbursement Form.	
22. Signature of authorized person (fax, copy or original signature)	23. Date
	<u>11-11-10</u>
24. Printed name of authorized person	
<u>Dennis DeJoy</u>	
25. Title or position of authorized person	
<u>CFO</u>	
26. Telephone number of authorized person	
<u>816-564-2902</u>	
27. Address of authorized person	
<u>P.O. Box 25526</u> <u>Kansas City MO 64119</u>	

A paper copy of this Form (pages 1-4) should be mailed to:

SLD BEAR Form
P. O. Box 7026
Lawrence, KS 66044-7026

If sent by express delivery services or U.S. Postal Service, Return Receipt Requested, the form (pages 1-4) should be mailed to:

SLD Forms
ATTN: SLD BEAR Form 472
3833 Greenway Drive
Lawrence, KS 66046
Phone: 1-888-203-8100

Do not write in this space.

Approval by OMB

3060 – 0856

Estimated time per response: 1.5 hours

Universal Service for Schools and Libraries

Please read instructions before completing.

(To be completed by schools, libraries, or consortia.)

BILLED ENTITY APPLICANT REIMBURSEMENT FORM

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

Only one Service Provider Identification Number (SPIN) per form.

Must be completed and signed by the Billed Entity Applicant and signed by the relevant service provider.

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

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BLOCK 1: HEADER INFORMATION

1. 471 Billed Entity Name	Pueblo City School District 60
2. 471 Billed Entity Number	142321
3. Service Provider Identification Number (SPIN)	143010971
4. Contact Name	Cassie Walgren
5. Contact Telephone Number	719-549-7121
6. Reimbursement Form Number	MicroTech
7. Reimbursement Date to USAC	11/3/10
8. Total Reimbursement Amount (total of Block 2, Item 15 – 14.2 digits maximum)	\$2,258.31

Billed Entity Applicant Reimbursement Form

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

471 Billed Entity Name Pueblo City School District 60 471 Billed Entity Number 142321

Contact Name Cassie Walgren Contact Telephone Number 719-549-7121

Reimbursement Form Number MicroTech

BLOCK 2: LINE ITEM INFORMATION PER FUNDING REQUEST NUMBER

	(9) FCC Form 471 Application Number (10 digits) (from Funding Commitment Decision Letter)	(10) Funding Request Number (FRN) (10 digits) (from Funding Commitment Decision Letter)	(11) Bill Frequency	(12) Customer Billed Date (mm/yyyy)	(13) Shipping Date to Customer or Last Day of Work Performed (mm/dd/yyyy)	(14) Total (Undiscounted) Amount for Service (14.2 digits max.)	(15) Discount Amount Billed to USAC (14.2 digits max.)
			DO NOT WRITE IN THIS COLUMN.	For each FRN, complete either Column (12) or Column (13), but not both Columns		14.2 digits allows for dollars and cents	
1	696098	1912965		07/01/2009		36,394	2,258.31
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
TOTAL REIMBURSEMENT AMOUNT TO BE ENTERED INTO ITEM (8)							2,258.31

BILLED ENTITY APPLICANT Reimbursement Form471 Billed Entity Name Pueblo City School District 60471 Billed Entity Number 142321Contact Name Cassie WalgrenReimbursement Form Number MicroTech**Block 3: Billed Entity Certification**

I certify that I am authorized to submit this Billed Entity Applicant Reimbursement Form on behalf of the eligible schools, libraries, or consortia of those entities represented on this Form, and certify to the best of my knowledge, information and belief, as follows:

- A. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form represent charges for eligible services delivered to and used by eligible schools, libraries, or consortia of those entities for educational purposes, on or after the service start date reported on the associated Form 486.
- B. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form were already billed by the service provider and paid by the Billed Entity Applicant on behalf of eligible schools, libraries, and consortia of those entities.
- C. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form are for eligible services approved by the fund administrator pursuant to a Form 471 Funding Commitment Decision Letter.
- D. I recognize that I may be audited pursuant to this application and will retain for five years any and all records that I rely upon to fill in this form.

16. Signature of authorized person



17. Date

8 Nov 2010

18. Printed name of authorized person

Daniel E. Combs

19. Title or position of authorized person

Director of Technology

20. Telephone number of authorized person

7195497292

21. Address of authorized person

1920 Montezuma Road**Pueblo, CO 81003**

BILLED ENTITY APPLICANT Reimbursement Form	
471 Billed Entity Name <u>Pueblo City School District 60</u>	
471 Billed Entity Number <u>142321</u>	
Contact Name <u>Cassie Walgren</u>	
Reimbursement Form Number <u>MicroTech</u>	
Block 4: Service Provider Acknowledgment	
I certify that I am authorized to submit this Service Provider Acknowledgment for this Billed Entity Applicant Reimbursement Form, and acknowledge to the best of my knowledge, information and belief, as follows:	
A. The service provider must remit the discount amount authorized by the fund administrator to the Billed Entity Applicant who prepared and submitted this Billed Entity Applicant Reimbursement Form as soon as possible after the fund administrator's notification to the service provider of the amount of the approved discounts on this Billed Entity Applicant Reimbursement Form, but in no event later than 20 business days after receipt of the reimbursement payment from the fund administrator, subject to the restriction set forth in B. below.	
B. The service provider must remit payment of the approved discount amount to the Billed Entity Applicant prior to tendering or making use of the payment issued by the Universal Service Administrative Company to the service provider of the approved discounts for the Billed Entity Applicant Reimbursement Form.	
22. Signature of authorized person (fax, copy or original signature)	23. Date
<u>Karen Feldman</u>	<u>12/11/2010</u>
24. Printed name of authorized person	
<u>Karen Feldman</u>	
25. Title or position of authorized person	
<u>Executive Assistant</u>	
26. Telephone number of authorized person	
<u>303-307-3077</u>	
27. Address of authorized person	
<u>5600 Greenwood Plaza Blvd</u> <u>Suite 300</u> <u>Greenwood Village, CO 80111</u>	

A paper copy of this Form (pages 1-4) should be mailed to:

SLD BEAR Form
P. O. Box 7026
Lawrence, KS 66044-7026

If sent by express delivery services or U.S. Postal Service, Return Receipt Requested, the form (pages 1-4) should be mailed to:

SLD Forms
ATTN: SLD BEAR Form 472
3833 Greenway Drive
Lawrence, KS 66046
Phone: 1-888-203-8100

Exhibit 9



Schools and Libraries Division

Form 472 (BEAR) Notification Letter

November 24, 2010

Dennis Devoy
Unite Private Networks, LLC
950 west Highway 92
Suite 203
Kearney, MO 64060

Re: Invoice Number - as assigned by USAC: 1418966
Service Provider Identification Number: 143029868
Reimbursement Form Number: UNITE-2
Billed Entity Number: 142321

Cassie Walgren
PUEBLO CITY SCHOOL DISTRICT 60
315 W. 11th Street
Pueblo, CO 81003

Preferred Mode of Contact: E-mail at cassandra.walgren@pueblocitieschools.us
Total Amount of Reimbursement Approved for Payment: \$0.00

This letter is your notification that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company (USAC) has processed an FCC Form 472, "Billed Entity Applicant Reimbursement (BEAR)" Form from the above named applicant listing you as the service provider. USAC has committed to reimburse the discounted portion of the cost of eligible services provided to eligible entities pursuant to one or more FCC Forms 471, "Description of Services Ordered and Certification Form".

In certain instances, a line may not have been paid. Review the BEAR Letter Applicant Reimbursement Report (Report) following this letter for the reason(s) this may have occurred. For more information about lines that have not been paid, see the explanation of Invoice Error Codes in Step 9 on our website. Work with the applicant (your customer) to correct any errors. Once corrected, your customer may submit a new BEAR to request reimbursement for any unpaid lines.

We recommend using the BEAR Online tool from the Apply Online area or Required Forms section of our website for additional submissions. If a new BEAR cannot be submitted before the invoice deadline passes, you or your customer may submit a request for a deadline extension. (See "Invoice Deadlines and Extension Requests" posted in the SLD section of our website for more information.)

Pursuant to the Federal Communication Commission's (FCC) Second Report and Order and Further Notice of Proposed Rulemaking (FCC 03-101, released April 29, 2003), you must remit the amount shown as "Total Amount of Reimbursement Approved for Payment" above to your customer no later than 20 days after receipt of payment of the approved discounts from USAC. You also agreed not to tender or make use of the payment of the approved discounts issued by USAC to you prior to remitting the discount to your customer (See BEAR Form, Block 4, Service Provider Acknowledgment).

The USAC check should be mailed to the service provider named above within 20 days of the date of this letter.

Schools and Libraries Division - Correspondence Unit
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685
Visit us online at: www.usac.org/sl

The maximum remaining amount available for each Funding Request Number (FRN) listed on the Report will be the original commitment less the amount approved herein for reimbursement and less any earlier disbursements to your customer.

PLEASE NOTE: The type of invoice form (BEAR or SPI) for the funding year is established by the receipt and approval of the first invoice submitted for the FRN for the funding year. For example, if we successfully process a BEAR for an FRN, we will not approve a SPI for that same FRN at a later time.

Please see the Guide to Letter Reports posted on our website for an explanation of the items listed in the attached Report.

COMPLETE PROGRAM INFORMATION is posted on our website. You may also contact our Client Service Bureau using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736 or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division
Universal Service Administrative Company

CC: PUEBLO CITY SCHOOL DISTRICT 60

BEAR NOTIFICATION LETTER APPLICANT REIMBURSEMENT REPORT

Form 471 Application Number: 650387
Funding Request Number: 1848573
Funding Year 2009: 07/01/2009 - 06/30/2010
Contract Number: N/A
Funding Commitment Decision: \$14208.75
Reimbursement Amount for this FRN: \$0.00
Reimbursement Request Decision Explanation:
Billed Date Before 486 Service-Start Date;

Form 471 Application Number: 696098
Funding Request Number: 1913013
Funding Year 2009: 07/01/2009 - 06/30/2010
Contract Number: N/A
Funding Commitment Decision: \$17152.94
Reimbursement Amount for this FRN: \$0.00
Reimbursement Request Decision Explanation:
Billed Date Before 486 Service-Start Date;



Universal Service Administrative Company
Schools and Libraries Division
Correspondence Unit
30 Lanidex Plaza West
PO Box 685
Parsippany, NJ 07054-0685



TIME SENSITIVE MATERIAL

00402
Cassie Walgren
PUEBLO CITY SCHOOL DISTRICT 60
315 W. 11th Street
Pueblo, CO 81003



Schools and Libraries Division

Form 472 (BEAR) Notification Letter

November 24, 2010

Karen Feldman
Microtech-Tel
5600 Greenwood Plaza Blvd
Suite 300
Greenwood Village, CO 80111

Re: Invoice Number - as assigned by USAC: 1418965
Service Provider Identification Number: 143010971
Reimbursement Form Number: MICROTECH
Billed Entity Number: 142321

Cassie Walgren
PUEBLO CITY SCHOOL DISTRICT 60
315 W. 11th Street
Pueblo, CO 81003

Preferred Mode of Contact: E-mail at cassandra.walgren@pueblocitieschools.us
Total Amount of Reimbursement Approved for Payment: \$0.00

This letter is your notification that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company (USAC) has processed an FCC Form 472, "Billed Entity Applicant Reimbursement (BEAR)" Form from the above named applicant listing you as the service provider. USAC has committed to reimburse the discounted portion of the cost of eligible services provided to eligible entities pursuant to one or more FCC Forms 471, "Description of Services Ordered and Certification Form".

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Schools and Libraries Division - Correspondence Unit
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685
Visit us online at: www.usac.org/sl



The maximum remaining amount available for each Funding Request Number (FRN) listed on the Report will be the original commitment less the amount approved herein for reimbursement and less any earlier disbursements to your customer.

PLEASE NOTE: The type of invoice form (BEAR or SPI) for the funding year is established by the receipt and approval of the first invoice submitted for the FRN for the funding year. For example, if we successfully process a BEAR for an FRN, we will not approve a SPI for that same FRN at a later time.

Please see the Guide to Letter Reports posted on our website for an explanation of the items listed in the attached Report.

COMPLETE PROGRAM INFORMATION is posted on our website. You may also contact our Client Service Bureau using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736 or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division
Universal Service Administrative Company

CC: PUEBLO CITY SCHOOL DISTRICT 60

Exhibit 10

Do not write in this space.

Approval by OMB

3060 – 0856

Estimated time per response: 1.5 hours

Universal Service for Schools and Libraries

Please read instructions before completing.

(To be completed by schools, libraries, or consortia.)

BILLED ENTITY APPLICANT REIMBURSEMENT FORM

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

Only one Service Provider Identification Number (SPIN) per form.

Must be completed and signed by the Billed Entity Applicant and signed by the relevant service provider.

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERF, Paperwork Reduction Act Project (3060-0856), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0856.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

BLOCK 1: HEADER INFORMATION

1. 471 Billed Entity Name	Pueblo City School District 60
2. 471 Billed Entity Number	142321
3. Service Provider Identification Number (SPIN)	143029868
4. Contact Name	Cassie Walgren
5. Contact Telephone Number	719-549-7121
6. Reimbursement Form Number	Unite-2
7. Reimbursement Date to USAC	12/1/2010
8. Total Reimbursement Amount (total of Block 2, Item 15 – 14.2 digits maximum)	\$31,361.69

Billed Entity Applicant Reimbursement Form

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

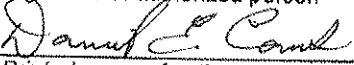
471 Billed Entity Name Pueblo City School District 60 471 Billed Entity Number 142321

Contact Name Cassie Walgren Contact Telephone Number 719-549-7121

Reimbursement Form Number Write-2

BLOCK 2: LINE ITEM INFORMATION PER FUNDING REQUEST NUMBER

	(9) FCC Form 471 Application Number (10 digits) (from Funding Commitment Decision Letter)	(10) Funding Request Number (FRN) (10 digits) (from Funding Commitment Decision Letter)	(11) Bill Frequency	(12) Customer Billed Date (mm/yyyy)	(13) Shipping Date to Customer or Last Day of Work Performed (mm/dd/yyyy)	(14) Total (Undiscounted) Amount for Service (14.2 digits max.)	(15) Discount Amount Billed to USAC (14.2 digits max.)
			DO NOT WRITE IN THIS COLUMN.	For each FRN, complete either Column (12) or Column (13), but not both Columns		14.2 digits allows for dollars and cents	
1	650387	1848573		6/16/2010		207,933	14,208.75
2	696098	1913013		6/16/2010		230,436	17,152.94
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
TOTAL REIMBURSEMENT AMOUNT TO BE ENTERED INTO ITEM (8)						31,361.69	

BILLED ENTITY APPLICANT Reimbursement Form	
471 Billed Entity Name <u>Pueblo City School District 60</u>	
471 Billed Entity Number <u>142321</u>	
Contact Name <u>Cassie Walgren</u>	
Reimbursement Form Number <u>Unite-2</u>	
Block 3: Billed Entity Certification	
<p>I certify that I am authorized to submit this Billed Entity Applicant Reimbursement Form on behalf of the eligible schools, libraries, or consortia of those entities represented on this Form, and certify to the best of my knowledge, information and belief, as follows:</p> <p>A. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form represent charges for eligible services delivered to and used by eligible schools, libraries, or consortia of those entities for educational purposes, on or after the service start date reported on the associated Form 486.</p> <p>B. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form were already billed by the service provider and paid by the Billed Entity Applicant on behalf of eligible schools, libraries, and consortia of those entities.</p> <p>C. The discount amounts listed in Column (15) of this Billed Entity Applicant Reimbursement Form are for eligible services approved by the fund administrator pursuant to a Form 471 Funding Commitment Decision Letter.</p> <p>D. I recognize that I may be audited pursuant to this application and will retain for five years any and all records that I rely upon to fill in this form.</p>	
16. Signature of authorized person 	17. Date <u>12-2-2010</u>
18. Printed name of authorized person Daniel E. Combs	
19. Title or position of authorized person Director of Technology	
20. Telephone number of authorized person 7195497292	
21. Address of authorized person 1920 Montezuma Pueblo, CO 81003	

BILLED ENTITY APPLICANT Reimbursement Form	
471 Billed Entity Name <u>Pueblo City School District 60</u>	
471 Billed Entity Number <u>142321</u>	
Contact Name <u>Cassie Walgren</u>	
Reimbursement Form Number <u>Unite-2</u>	
Block 4: Service Provider Acknowledgment	
I certify that I am authorized to submit this Service Provider Acknowledgment for this Billed Entity Applicant Reimbursement Form, and acknowledge to the best of my knowledge, information and belief, as follows:	
A. The service provider must remit the discount amount authorized by the fund administrator to the Billed Entity Applicant who prepared and submitted this Billed Entity Applicant Reimbursement Form as soon as possible after the fund administrator's notification to the service provider of the amount of the approved discounts on this Billed Entity Applicant Reimbursement Form, but in no event later than 20 business days after receipt of the reimbursement payment from the fund administrator, subject to the restriction set forth in B. below.	
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22. Signature of authorized person (fax, copy or original signature)	23. Date
<i>Dennis R. Devoy</i>	<i>12-6-10</i>
24. Printed name of authorized person	
<i>Dennis Devoy</i>	
25. Title or position of authorized person	
<i>CFO</i>	
26. Telephone number of authorized person	
<i>816-564-2902</i>	
27. Address of authorized person	
<i>P.O. Box 25526</i> <i>Kansas City, MO 64119</i>	

A paper copy of this Form (pages 1-4) should be mailed to:

SLD BEAR Form
P. O. Box 7026
Lawrence, KS 66044-7026

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SLD Forms
ATTN: SLD BEAR Form 472
3833 Greenway Drive
Lawrence, KS 66046
Phone: 1-888-203-8100

Do not write in this space.

Approval by OMB
3060 – 0856
Estimated time per response: 1.5 hours

Please read instructions before completing.

(To be completed by schools, libraries, or consortia.)

Universal Service for Schools and Libraries

BILLED ENTITY APPLICANT REIMBURSEMENT FORM

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

Only one Service Provider Identification Number (SPIN) per form.

Must be completed and signed by the Billed Entity Applicant and signed by the relevant service provider.

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

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The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0856), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

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BLOCK 1: HEADER INFORMATION

1. 471 Billed Entity Name	Pueblo City School District 60
2. 471 Billed Entity Number	142321
3. Service Provider Identification Number (SPIN)	143010971
4. Contact Name	Cassie Walgren
5. Contact Telephone Number	719-549-7121
6. Reimbursement Form Number	MicroTech
7. Reimbursement Date to USAC	12/1/2010
8. Total Reimbursement Amount (total of Block 2, Item 15 – 14.2 digits maximum)	2,258.31

Billed Entity Applicant Reimbursement Form

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

471 Billed Entity Name Pueblo City School District 60 471 Billed Entity Number 142321

Contact Name Cassie Walgren Contact Telephone Number 719-549-7121

Reimbursement Form Number _____

BLOCK 2: LINE ITEM INFORMATION PER FUNDING REQUEST NUMBER

	(9) FCC Form 471 Application Number (10 digits) (from Funding Commitment Decision Letter)	(10) Funding Request Number (FRN) (10 digits) (from Funding Commitment Decision Letter)	(11) Bill Frequency	(12) Customer Billed Date (mm/yyyy)	(13) Shipping Date to Customer or Last Day of Work Performed (mm/dd/yyyy)	(14) Total (Undiscounted) Amount for Service (14.2 digits max.)	(15) Discount Amount Billed to USAC (14.2 digits max.)
			DO NOT WRITE IN THIS COLUMN.	For each FRN, complete either Column (12) or Column (13), but not both Columns		14.2 digits allows for dollars and cents	
1	696098	1912965		6/16/2010		36,394	2,258.31
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
TOTAL REIMBURSEMENT AMOUNT TO BE ENTERED INTO ITEM (8)							2,258.31

BILLED ENTITY APPLICANT Reimbursement Form**471 Billed Entity Name** Pueblo City School Distrtict 60**471 Billed Entity Number** 142321**Contact Name** Cassie Walgren**Reimbursement Form Number** MicroTech**Block 3: Billed Entity Certification**

I certify that I am authorized to submit this Billed Entity Applicant Reimbursement Form on behalf of the eligible schools, libraries, or consortia of those entities represented on this Form, and certify to the best of my knowledge, information and belief, as follows:

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- D. I recognize that I may be audited pursuant to this application and will retain for five years any and all records that I rely upon to fill in this form.

16. Signature of authorized person**17. Date****18. Printed name of authorized person****Daniel E. Combs****19. Title or position of authorized person****Director of Technology****20. Telephone number of authorized person****7195497292****21. Address of authorized person****1920 Montezuma Road****Pueblo, CO 81003**

BILLED ENTITY APPLICANT Reimbursement Form	
471 Billed Entity Name <u>Pueblo City School District 60</u>	
471 Billed Entity Number <u>142321</u>	
Contact Name <u>Cassie Walgren</u>	
Reimbursement Form Number <u>MicroTech</u>	
Block 4: Service Provider Acknowledgment	
I certify that I am authorized to submit this Service Provider Acknowledgment for this Billed Entity Applicant Reimbursement Form, and acknowledge to the best of my knowledge, information and belief, as follows:	
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22. Signature of authorized person (fax, copy or original signature)	23. Date
<u>Karen Feldman</u>	<u>12/3/10</u>
24. Printed name of authorized person	
<u>Karen Feldman</u>	
25. Title or position of authorized person	
<u>Executive Assistant</u>	
26. Telephone number of authorized person	
<u>303-307-3077</u>	
27. Address of authorized person	
<u>5600 Greenwood Plaza Blvd</u> <u>Suite 300</u> <u>Greenwood Village, CO 80111</u>	

A paper copy of this Form (pages 1-4) should be mailed to:

SLD BEAR Form
P. O. Box 7026
Lawrence, KS 66044-7026

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SLD Forms
ATTN: SLD BEAR Form 472
3833 Greenway Drive
Lawrence, KS 66046
Phone: 1-888-203-8100